lowa Ethics and Campaign

Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Fax: 515-281-4073

07/23/2012 10:14

File with:

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

AMPAIGN DISCLOSURE BE July 6 An 10:04

	Kes	et Form		
COMMITTEE NAME (Must be same as on Statement of Org	enization)	The state of the s		
Darrell E Nelson for Supervisor, Donna L. Nelson Treas	lirer		FORM	
IMPORTANT: Indicate by # type =4			DR-2	
(1) Statewide/Legislative/Judge Standing for Retention Candidate ( 4) County Central Committee (5) County Candidate (6) No. County Candidate (6) N	2 )State BAC ( 2 ) Sunt - 2			DISCLOSURE
(4) County Central Committee (5) County Candidate (8) City Candidate (8) Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	2 Jointo PAC (3) State Party Idate (7) School Board or Other F Board or Other Political Substitution	obtical p. BAC	(Rev. 12/2009)	REPORT
CANDIDATE COMMITTEES ONLY:	The Following Copyrigo	II PAC (	Comm #	TA.
Candidate Name			Comm.#	
Darrell E Nelson	Political Party (if applical	ble)	Logged In	
Office Sought			Computer	
County Supervisor	District (if Senate or Hou		ComputerAudited	_
Late reports are subject to possible civil and criminal panalties. Pur candidate's committee, and the chairperson, for any other type of c	Suant to lowe Code sections 688	370(7)	1	
candidate's committee, and the champerson, for any other type of c	ommittee, is the individual respo	nsible for filin	og timely and accurat	didate, for a
Na Ma				
SIGNATURE OF PERSON FILING REPORT	7/2 225 UNU	5	1,1.1	220
SIGNATURE OF PERSON FILING REPORT	7/2 225 404 TELEPHONE	2	DATE SIC	10017
I AM FILING A July 19, 2012			Name and Address of the Owner, where the Owner, which is the O	
(report date)	REPORT FOR (1) ELECT	TON /(2)NO	N-ELECTION YEAR	₹.
1. 1. 2. 2. 2. 2.	4	by # 1		
CHECK IF AMENDMENT TO REPORT DATED		Land C.		
Check If this is final (termination)			mmittees, enter Date	of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	Nov. 6	,2012	
and a bloc is med.)		Which Ele	Local Committees, e	nter County in
		Cherol	cce	
STATEMENT OF CASH ON HAND	The second second second second	A SALES WHEN PERSONS IN	NAME OF TAXABLE PARTY.	The Particular of the Particul
CASH ON HAND at the paginning of the mandi	1 - # - 11 P			
committee. This amount MUST be the same as the ca of the last reporting period or must be zero if the last	sh on hand at the and			
2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	report filed.)		346,31	
THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Resched to 2014)	A) (*also one in kind halo.		0.00	
Attach Schedule F				
Schedule H: Total Sales of Campaign Property (Attach	Schodule HI			
(Schedule Happlies to Candidates' Commit	tees Only	***************************************		
			246.04	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL.	\$	346.34	
Schedule B: Expenditures total (Attach Schedule B) (**)	Non and the			
Schedule F: Loan Repayments total (Amark Calants)	also see debts and loans below	v)	214.00	
Schedule F: Loan Repayments total (Attach Schedule F	· · ·		132,34	
ASH ON HAND at the end of this reporting period (if final report	balance must be zero)		- 0	)
UNPAID BILLS (From Schedule D - Attach Schedule D)	,	\$		
The Contributions (From Schedule E - Attach Schedule	E			
DOTSTANDING LOANS (From Schedule F - Attach Schedule F	),	\$		
PROULIANT BREAKDOWN (Schedule G Attached?)			YES NO	-
ANDIDATE COMMITTEES ONLY:		0		
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach S	Schedule H)			

STATE COMMITTEES: Submit a reconciled compaign account bank statement in January of each year.

Reset Form

## For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)	
COMMITTEE NAME (Must be same as o	n Statement of Organization)
Darrell E Neson for Supervisor Donna I	Nelson Treasurer
	THE PAC POLITICAL ACTION COM

(Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE" (if applicable)	RECEIVED	FUND- RAISER INCOME
	1D# 18812 CK#	interest on checking account 213233	Cherokee State t	\$0.03	
	ID#				
	CK#				
	1D#		-		
	CK#				
	ID#				
	CK#				-
	ID#				
	CK#			-	1=
24.00	ID#				
	CK#				
	ID#				
	CK#				-
	ID#				
	CK#				
1101	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	\$	
		TOTAL (If les	st page of this schedul	Company of the Party of the Par	

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the DISCUSSIVE INVESTIGATION OF THE COMMITTEES IN DISCUSSE IN THE RELIGIOUS OF THE PROPERTY OF THE COMMITTEE. Relationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

23/2012 18 FOR INSTRUC	1:14 7122253782 HY	VEE PHARMACY 1068	PAGE 03/
COMMITTEE N	AME(Must be same as on Statement of Organization) son for supervisor Donna L Nelson treasurer	RESET	F LOANS
NOTE: This sch	edule reports money loaned to the committee which is deposited LOANS FROM LAST REPORTING PERIOD \$	in the committee account.	CHECK THIS BOX IF AMENDING FORM
	TARY LOANS RECEIVED THIS REPORTING PERIOD all source of loan, such as a benk, must be shown if a third party in the shown	s involved. Include loans from can	didate's personal funds.)
RECEIVED (MM/DD/YR		RELATIONSHIP TO CANDIDATE (If Applicable	AMOUNT OF LOAN
			5
PART II - MONE	TARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD	TOTAL (PART I)	\$
DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER		
06/08/12	(Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
00/00/12	Darrell E Nelson	self	<sup>\$</sup> 132.34
	TOTAL CASH R	EPAYMENTS (PART II)	132,34

From Schedule E - TOTAL LOANS FORGIVEN TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by merriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the

relationship column when it applies.

\$ 0.00

Page 1 of 1 (for Schedule F)